Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10721670

								<u></u>	ν	0	<u>/</u>	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL EI	YTITY	OR	OTHER SMALL		
TOTAL CLAIMS			13					RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			18 min	nus 20=	* 1	* 0		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			10 mi	nus 3 =	* 7			X43=		OR	X86=	602
MULTIPLE DEPENDENT CLAIM PI			RESENT					+145=		OR	+290=	000
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in c	olumn 2	İ	TOTAL		OR	TOTAL	1277
CLAIMS AS AMENDED - PART II								10.7.2		,	OTHER	THAN
	_ ·	(Column 1)		(Colum	nn 2)	(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	-:	=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
								TOTAL			TOTAL ADDIT. FEE	
		(Column 1)		,	ADDIT. FEE			ADDIT. I EE				
		CLAIMS . HI		(Colum	EST	(Column 3)	ſ	-	ADDI-	1 1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		= ·		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	;	X43=		OR	X86=	
	FIRST PRESE	NTATION OF ML	ILTIPLE DEP	ENDENT	CLAIM			+145=		OR	+290=	
	• ,							TOTAL ADDIT, FEE			TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)										,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT C	` .	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	•	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											TOTAL	
***	If the "Highest Nu	mber Previously Pa mber Previously Pa ber Previously Paid	aid For" IN THIS	S SPACE is	s less thai	n 3, enter "3."		DDIT. FEE L		. ,	ADDIT. FEE I lumn 1.	